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UNCLAS TORONTO 002615

SIPDIS

STATE FOR WHA/CAN, CA/OCS, M/MED, and M/DASHO  
HHS FOR OFFICE OF THE SECRETARY, OFFICE OF  
INTERNATIONAL AFFAIRS (STEIGER), CDC FOR GLOBAL HEALTH  
OFFICE (COX)

E.O. 12958: N/A

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SUBJECT: Toronto "Mystery" Flu Illness Identified as  
Legionnaire's Disease

Ref: (A) Toronto 0153 (B) Toronto 2602  
(C) Toronto 2614

1. On October 6 late in the afternoon Ontario public officials announced that the mystery illness in Toronto that has attracted international media attention and killed 16 seniors in a nursing home had just been identified as a particular strain of Legionnaire's disease that could only be detected by culture and serology procedures. Forty urinary tests had shown negative results earlier, but tissue samples from the lungs of three of the deceased tested positive for legionella pneumophila by mid-day on Thursday, October 16.

2. Both David McKeown, Toronto's Medical Officer of Health, and Donald Low, the new medical director of the Ontario Public Health Lab who himself collected the lung tissue samples for culture, assured the public in their interviews late October 6 that the disease was an environmental contamination ("an aerosolization") that would remain under investigation (the ventilation system in the nursing home has been shut down; antibiotics distributed), and that the general population was not at risk. For the third day in a row there have been no new cases, though 40 people remain hospitalized and a few more deaths could be expected. There have been only 13 cases of Legionnaires' disease in Ontario in the past five years.

3. The Premier, the Mayor of Toronto and the provincial health minister have also made statements to assure the public that the disease is not contagious through personal contact; however, the plane crash in Winnipeg carrying flu virus samples has attracted attention here and, with the upcoming conference in Ottawa on pandemics, will likely keep the public concern level high. An October 7 editorial in the "Toronto Star," the largest newspaper in the country, credits public health officials and politicians for putting to use hard-won lessons learned from the 2003 SARs and hopes that international media will extend this credit in as high a profile as it gave to the initial outbreak.

LECROY